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CONFIRMATION NO. 3833

<b>SERIAL NUMBER</b> 10/771,969	<b>FILING OR 371(c) DATE</b> 02/04/2004 <b>RULE</b>	<b>CLASS</b> 428	<b>GROUP ART UNIT</b> 1772	<b>ATTORNEY DOCKET NO.</b> 659/2240
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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 10/352,525 01/27/2003 PAT 6,706,352 which is a DIV of 09/660,040 09/12/2000 PAT 6,537,631  
 which is a CIP of 09/565,227 05/04/2000 PAT 6,705,565  
 which is a CIP of 09/545,995 04/10/2000 PAT 6,626,395  
 which claims benefit of 60/132,024 04/30/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\* NONE****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 05/04/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> WI	<b>SHEETS DRAWING</b> 28	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>A. J. [Signature]</i> Initials				

**ADDRESS**

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**TITLE**

Roll of wet wipes

<b>FILING FEE RECEIVED</b> 1350	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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